



Write-In Candidate Declaration of Intent and Oath of Candidacy

FOR FILING
OFFICE ONLY

Filed this _____ day of _____, 20____
Document # _____
By: _____
Deputy or Filing Officer

DECLARATION AND OATH TO BE FILED WITH ☐ SECRETARY OF STATE ☐ COUNTY ELECTION ADMINISTRATOR

☐ FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan)
candidate at the Primary Election held on _____, 20____.

☒ FOR A GENERAL ELECTION: election to the office of HD-2 as a candidate at the General Election held on August 16, 2012

Candidate Name: Philip O. Grassley

Mailing Address: P.O. Box 238 Fortine, Mt. 59918-0238
Street or PO Box City Zip

Residence Address: 46 1st Street North Fortine, Mt 59918-0238
Street City Zip

County of Residence: Lincoln Home Phone: 406-882-4016 Work Phone: N/A

Email Address: ginnyemerson@hotmail.com Website Address: N/A

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

☒ (a) I hereby certify that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

☐ (b) I hereby certify that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

Philip O. Grassley
Signature of Candidate

8-16-2012
Date

NOTARY OR AUTHORIZED OFFICER

State of Montana

County of Lincoln

Signed and sworn to before me this 16th day of August, 2012 by Philip O. Grassley
Printed Name of Candidate

Where to file for Federal, Statewide,
State District and Legislative offices:

Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801

Helena, MT 59620-2801
Online: candidates.mt.gov
By Fax: 406-444-2023

Where to file for County, City and
most Local District offices:

County Election Administrator's Office
A list of county election offices may
be found at: sos.mt.gov/elections



KATHY A. LEWIS
NOTARY PUBLIC for the
State of Montana
Residing at Trego, Montana
My Commission Expires
August 4, 2015

[SEAL/STAMP]

Kathy A. Lewis

Signature of Notary or Public Official

[Montana notaries must complete the following if not part of stamp at left]

Kathy A. Lewis

Printed Name of Notary Public

Notary Public for the State of Montana

Residing at: Trego

My commission expires: Aug. 5, 2015

ORIG = CPP
CC = Secretary of State
CC = Election OFC
Libx



Write-In Candidate Declaration of Intent and Oath of Candidacy – Reverse

FOR FILING
OFFICE ONLY

Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print) Philip O. Grassley

IF THIS PETITION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Candidate Name: _____
Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ 15⁰⁰ is hereby submitted with this Declaration.

☒ I certify that pursuant to 13-10-211 (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under 13-10-202, MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to 13-10-204 and 13-15-111.

☒ I understand that pursuant to 13-10-211 (1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives of his/her name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's name is listed above.

WRITE-IN CANDIDATE DESIGNATIONS

Pursuant to 13-10-302 and 13-15-206, MCA, a write-in vote may only be counted if the oval, box, or other designated voting area on the ballot is marked and the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in candidate's declaration of intent which must contain:

- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to 13-10-211 (1), MCA, including my last name and at least an initial, which is required by law for each variation:

Philip O. Grassley
Phillip Grassley
Phil Grassley

If additional, list below:



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DECLARATION AND OATH TO BE FILED WITH ☒ SECRETARY OF STATE ☐ COUNTY ELECTION ADMINISTRATOR

☐ FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan)
candidate at the Primary Election held on _____, 20____.

☒ FOR A GENERAL ELECTION: election to the office of HD-31 as a candidate at the General Election held on 11/6, 2012.

Candidate Name: Walter White Tail Feather

Mailing Address: P.O. Box 606 Poplar, MT 59255
Street or PO Box City Zip

Residence Address: 5497 BIA Route 1 Poplar, MT 59255
Street City Zip

County of Residence: Roosevelt, MT Home Phone: 406.451.3390 Work Phone: 406.768.2344

Email Address: WalterWhitetailfeather@gmail.com Website Address: _____
tribes.org

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

☒ (a) I hereby certify that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

☐ (b) I hereby certify that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

[Signature]
Signature of Candidate

9/21/12
Date

NOTARY OR AUTHORIZED OFFICER

State of Montana

County of Roosevelt

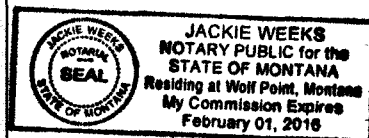
Signed and sworn to before me this 21st day of September, 2012 by Walter White Tail Feather
Printed Name of Candidate

Where to file for Federal, Statewide, State District and Legislative offices:

Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801
Helena, MT 59620-2801
Online: candidates.mt.gov
By Fax: 406-444-2023

Where to file for County, City and most Local District offices:

County Election Administrator's Office
A list of county election offices may be found at: sos.mt.gov/elections



[SEAL/STAMP]

Jackie Weeks
Signature of Notary or Public Official
[Montana notaries must complete the following if not part of stamp at left]

Jackie Weeks
Printed Name of Notary Public

Notary Public for the State of Montana

Residing at: Wolf Point

My commission expires: 02/01/2016



Write-In Candidate Declaration of Intent and Oath of Candidacy – Reverse

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Filed this _____ day of _____, 20____

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By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print) Walter White Tail Feather

IF THIS PETITION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Candidate Name: _____
Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ 15.00 is hereby submitted with this Declaration.

☒ I certify that pursuant to 13-10-211 (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under 13-10-202, MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to 13-10-204 and 13-15-111.

☒ I understand that pursuant to 13-10-211 (1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives of his/her name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's name is listed above.

WRITE-IN CANDIDATE DESIGNATIONS

Pursuant to 13-10-302 and 13-15-206, MCA, a write-in vote may only be counted if the oval, box, or other designated voting area on the ballot is marked and the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in candidate's declaration of intent which must contain:

- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to 13-10-211 (1), MCA, including my last name and at least an initial, which is required by law for each variation:

Walter Tailfeather, Walter Tailfeather, Walter Tail Feather, Walter Tail Feathers,

Walter White Tail Feather, Walter White Tail Feathers, Walter White tail feather,

Walter White tail feathers, Walter White Tailfeather, Walter White Tailfeathers,

Walter White tail Feather, Walter White tail Feathers, Walter white tail feather,

Walter white tail feathers, Walter Whitetailfeather, Walter Whitetailfeathers,

Walter White, Walter Whitetail, Walter White Tail, Walter Feather, Walter Feathers
Walter Tailfeathers, Walter WTF, W. Tailfeather, W. Tailfeathers, W. Tail Feather,

W. Tail Feathers, W. White Tail Feather, W. White Tail Feathers, W. White tail feather,
if additional, list below: W. White tail feathers, W. White Tailfeather, W. White Tailfeathers,

W. White tail Feather, W. White tail Feathers, W. white tail feather, W. white tail feathers,
W. whitetailfeather, W. Whitetailfeathers, W. White, W. Whitetail, W. WhiteTail, W. White Tail,
W. Feather, W. Feathers,

Updated July 7, 2011



Write-In Candidate Declaration of Intent and Oath of Candidacy

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By: _____

Deputy or Filing Officer

DECLARATION AND OATH TO BE FILED WITH ☐ SECRETARY OF STATE ☒ COUNTY ELECTION ADMINISTRATOR

☐ FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan)

candidate at the Primary Election held on _____, 20____

☒ FOR A GENERAL ELECTION: election to the office of ST. Representative House Dist. 31 as a candidate at the General Election held on Nov. 6, 2013

Candidate Name: Bill Whitehead

Mailing Address: P.O. Box 1135 Wolf Point, MT 59201
Street or PO Box City Zip

Residence Address: 1010 W. Cascade Wolf Point, MT 59201
Street City Zip

County of Residence: Roosevelt Home Phone: Cell 406/650-7272 Work Phone: _____

Email Address: _____ Website Address: _____

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

☒ (a) I hereby certify that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

☐ (b) I hereby certify that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

William E. Whitehead
Signature of Candidate

9/27/12
Date

NOTARY OR AUTHORIZED OFFICER:

State of Montana

County of Montana

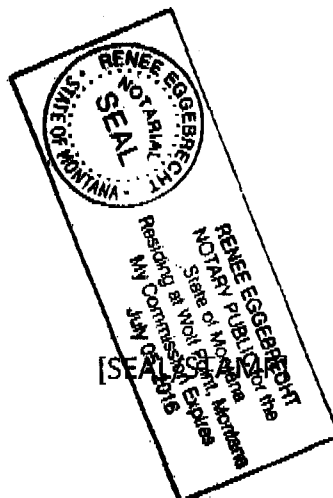
Signed and sworn to before me this 27 day of Sept, 2012 by Bill Whitehead
Printed Name of Candidate

Where to file for Federal, Statewide,
State District and Legislative offices:

Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801
Helena, MT 59620-2801
Online: candidates.mt.gov
By Fax: 406-444-2023

Where to file for County, City and
most Local District offices:

County Election Administrator's Office
A list of county election offices may
be found at: sos.mt.gov/elections



Renee Eggebrecht
Signature of Notary or Public Official
[Montana notaries must complete the following if not part of stamp at left]

Renee Eggebrecht
Printed Name of Notary Public

Notary Public for the State of Montana

Residing at: Wolf Point

My commission expires: 7-5-16, 2016



Write-In Candidate Declaration of Intent and Oath of Candidacy - Reverse

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Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print)

Bill Whitehead

IF THIS PERSON IS RUNNING FOR GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Candidate Name: _____

Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ 15.00 is hereby submitted with this Declaration.

☒ I certify that pursuant to 13-10-211 (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under 13-10-202, MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to 13-10-204 and 13-15-111.

☒ I understand that pursuant to 13-10-211 (1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives of his/her name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's name is listed above.

WRITE-IN CANDIDATE DESIGNATIONS

Pursuant to 13-10-302 and 13-15-206, MCA, a write-in vote may only be counted if the oval, box, or other designated voting area on the ballot is marked and the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in candidate's declaration of intent which must contain:

- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to 13-10-211 (1), MCA, including my last name and at least an initial, which is required by law for each variation:

Bill Whitehead, Sonny Whitehead, Sonny Bill Whitehead
Bill Sonny Whitehead, William E. Whitehead
William Whitehead, Will Whitehead Sonny Bill Whitehead
B. Whitehead, W. Whitehead, Sonny Whitehead
Bill Whitehead, William Whitehead Sonny Whitehead

If additional, list below:



Write-In Candidate Declaration of Intent and Oath of Candidacy

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Deputy or Filing Officer

DECLARATION AND OATH TO BE FILED WITH ☐ SECRETARY OF STATE ☐ COUNTY ELECTION ADMINISTRATOR

☐ FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan) _____ candidate at the Primary Election held on _____, 20____.

☒ FOR A GENERAL ELECTION: election to the office of MT House District 69 as a candidate at the General Election held on 11/06, 2012

Candidate Name: Jim Gingery

Mailing Address: 46 B Prairie Grass Ct. Bozeman 59718
Street or PO Box City Zip

Residence Address: SAME - -
Street City Zip

County of Residence: Gallatin Home Phone: 406 640-0910 Work Phone: 406 640-0910

Email Address: AntelopeRealtyMT@gmail.com Website Address: www.GingeryForMontana.com
www.GINGERFORMT.COM

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

☒ (a) I hereby certify that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

☐ (b) I hereby certify that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

X Jim Gingery
Signature of Candidate

9/14/12
Date

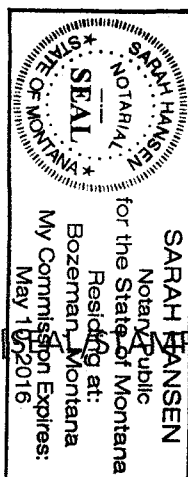
NOTARY OR AUTHORIZED OFFICER

State of Montana
County of Gallatin

Signed and sworn to before me this 14 day of September, 2012 by Jim Gingery
Printed Name of Candidate

Where to file for Federal, Statewide, State District and Legislative offices:
Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801
Helena, MT 59620-2801
Online: candidates.mt.gov
By Fax: 406-444-2023

Where to file for County, City and most Local District offices:
County Election Administrator's Office
A list of county election offices may be found at: sos.mt.gov/elections



Sarah Hansen
Signature of Notary or Public Official

[Montana notaries must complete the following if not part of stamp at left]

Sarah Hansen
Printed Name of Notary Public

Notary Public for the State of Montana

Residing at: Bozeman

My commission expires: May 10, 2016



Write-In Candidate Declaration
of Intent and Oath of Candidacy
– Reverse

FOR FILING
OFFICE ONLY

Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print) Jim Gingery

IF THIS PETITION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION

Lieutenant Governor Candidate Name: _____
Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ 15 is hereby submitted with this Declaration.

☒ I certify that pursuant to 13-10-211 (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under 13-10-202, MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to 13-10-204 and 13-15-111.

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WRITE-IN CANDIDATE DESIGNATIONS

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- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to 13-10-211 (1), MCA, including my last name and at least an initial, which is required by law for each variation:

J. Gingery, James Lee Gingery, James L. Gingery, Jimmy Gingery,
Jimmie Gingery, J. G., J. Ging, Jim Ging, James Lee Ging, James L. Ging,
J. Gingerly, Jim Gingerly, Jimmy / Jimmie Gingerly, James Lee Gingerly, James L.
Gingerly, James Gingerly, Ging, J. Gingerie, James Lee Gingerie, James L. Gingerie,
James Gingerie, Jim Gingerie, J. Gingerie

If additional, list below:



Write-In Candidate Declaration of Intent and Oath of Candidacy

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Deputy or Filing Officer

DECLARATION AND OATH TO BE FILED WITH ☐ SECRETARY OF STATE ☐ COUNTY ELECTION ADMINISTRATOR

☐ FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan)
_____ candidate at the Primary Election held on _____, 20____.

☒ FOR A GENERAL ELECTION: election to the office of House District #71 as a candidate at the General Election held on Nov 6, 2012.

Candidate Name: Donald J. Lepinsky

Mailing Address: P.O. Box 771 Whitehall 59759
Street or PO Box City Zip

Residence Address: 16 North Centurion Way Whitehall 59759
Street City Zip

County of Residence: Jefferson Home Phone: 406-498-4556 Work Phone: WA

Email Address: djlepinsky@gmail.com Website Address: WA

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

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OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

[Signature]
Signature of Candidate

08/10/2012
Date

NOTARY OR AUTHORIZED OFFICER

State of Montana JLC
County of _____

Signed and sworn to before me this 10th day of August, 2012 by Donald Lepinsky
Printed Name of Candidate

Where to file for Federal, Statewide,
State District and Legislative offices:

Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801
Helena, MT 59620-2801
Online: candidates.mt.gov
By Fax: 406-444-2023

Where to file for County, City and
most Local District offices:

County Election Administrator's Office
A list of county election offices may
be found at: sos.mt.gov/elections

Shannon H. Stevens

Signature of Notary or Public Official

[Montana notaries must complete the following if not part of
stamp at left]

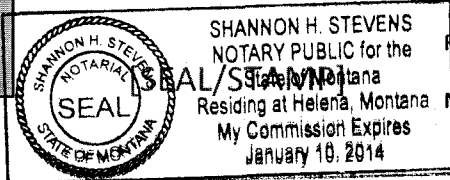
Shannon H. Stevens

Printed Name of Notary Public

Notary Public for the State of _____

Residing at: _____

My commission expires: _____, 20____





Write-In Candidate Declaration
of Intent and Oath of Candidacy
- Reverse

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OFFICE ONLY

Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print) Donald J Lepinsky

IF THIS PETITION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Candidate Name: _____
Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ 15.00 is hereby submitted with this Declaration.

☒ I certify that pursuant to 13-10-211 (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under 13-10-202, MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to 13-10-204 and 13-15-111.

☒ I understand that pursuant to 13-10-211 (1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives of his/her name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's name is listed above.

WRITE-IN CANDIDATE DESIGNATIONS

Pursuant to 13-10-302 and 13-15-206, MCA, a write-in vote may only be counted if the oval, box, or other designated voting area on the ballot is marked and the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in candidate's declaration of intent which must contain:

- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to 13-10-211 (1), MCA, including my last name and at least an initial, which is required by law for each variation:

Donald J. Lepinsky, Don Lepinsky, Don Lapinsky, Don Lipinsky,
Don Lepensky, Don Lepensky, Don Lipensky, Don Lepinski,
Don Lapinski, Don Lipinski, Don Lepenski, Don Lapenski,
Don Lipenski, Don J. Lepinsky, Don Lapensky

If additional, list below: